FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

20H OCT 28 PM 12: 13

FORM 1				FEC MAIL CENTER Office Use Only		
1. NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M	15	
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سيسيب	1.1.1.1			111		
ADDRESS (number and street)		[1,253 4 5T 155]				
(Check if address is changed)		 		لسسنسسا	
		WASHINGT	o, N, , , , , , , , , , , , , , , , , ,	DIC	20,003-122021	
			CITY	STATE	ZIP CODE	
COMMITTEE'S E-MA	AIL ADDRES	SS (Please provide only one	e-mail address)			
(Check if	address	hstaley	@gmail:com			
is change		<u> </u>				
COMMITTEE'S WEE	PAGE ADE	DRESS (URL)				
(Check if is change	address · d)					
2. DATE	0 2	3'.20:11				
3. FEC IDENTIFICATION NUMBER COCOCO S 9 2						
4. IS THIS STATE	MENT	NEW (N) OR	Mended (A)			
I certify that I have	examined th	is Statement and to the be	est of my knowledge and belief it	is true, corre	ect and complete.	
Type or Print Name	of Treasurer	HEATHER	S. FOLEY			
Signature of Treasur	er <u>U</u>	Leather &	foley	Date		
NOTE: Submission of		•	on may subject the person signing the TION SHOULD BE REPORTED W		to the penalties of 2 U.S.C. §437g.	
Office Use Only	. A		For further information confederal Election Commission Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)	